P02000//1/8

(Requestor's Name)	
	Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
· (Business Entity Name)	
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M/Ri Resen

SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO:	Amendment Section Division of Corporations		
SUB	JECT: TITLE SUPPORT GROUP, INC.		
	(Name of Corporation)		
DOC	CUMENT NUMBER: P020001111118		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing			
Pleas	se return all correspondence concerning this matter to the following:		
JAN	MES JEAN-FRANCOIS		
	(Name of Person)		
	(Name of Firm/Company)		
610	00 HOLLYWOOD BLVD. STE. 211		
	(Address)		
НО	LLYWOOD, FL 33024		
	(City/State and Zip Code)		
For f	urther information concerning this matter, please call:		
JAN	MES JEAN-FRANCOIS (Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)		
	(Name of Person) (Area Code & Daytime Telephone Number)		
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.		
Ame Divis Clifte 2661	mdment Section Sion of Corporations on Building Executive Center Circle Shassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314		

CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION DIVISION OF CORPORATIONS FOR A CORPORATION 09 AUG 13 AM 9: 20

g officer/director)

I JAMES JEAN-FRANCOIS	, hereby resign as PRESIDENT	
**************************************	(Title)	
of TITLE SUPPORT GROUP, INC.	·	
(Name of Co	poration)	
P02000111118, a c	, a corporation organized under the laws of the State of	
(Document Number, if known)		
FLORIDA		

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314